SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: Bayfield County

Washburn, WI 54891 (715) 373-6138 PO Box 58 Planning and Zoning Depart.

BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received)

Ī 222014

APPLICATION FOR PERMIT

THE PARTY

Date: Permit #: Amount Paid: 1-98-1-08014 11-92-12 11-100%

Refund:

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. Contractor: TYPE OF PERMIT REQUESTED—> X LAND USE Existing Structure: (If permit being applied for is relevant to it)
Proposed Construction: ☐ Shoreland Address of Pro 💢 Residential Use of Completion □ Non-Shoreland ムシブ Value at Time donated time & THE TOTAL PROPERTY OF THE PROP 350,000 PA T PROJECT LOCATION Rec'd for Issu THE. Commercial Use Municipal Use Proposed Use material Section C 73196 \cap 204 Whith ne Siening Application on behalf of Owner 00 \$ 7 ME S □ Run a Business on New Construction (What Legal Description: (Use Tax Statement) ☐ Is Property/Land within 300 feet of River, Stream (Incl. Intermittent)

Creek or Landward side of Floodplain?

If yes—continue —▶ X is Property/Land within 1000 feet of Lake, Pond or Flowage
If yes---continue Conversion
Relocate (exis Property Addition/Alteration , Township 48 N, Range Y W 1/4 Project × < you applying for) FAILURE TO OBTAIN A PERMIT of STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES ding any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) incuracy of all information in which providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the bird time for the purgose of inspection. Other: (explain) Conditional Use: (explain) Bunkhouse w/ (☐ sanitary, or ☐ sleeping Residence (i.e. cabin, hunting shack, etc.) Principal Structure (first structure on property) Special Use: (explain) Mobile Home (manufactured date) Accessory Building Addition/Alteration (specify) Accessory Building Addition/Alteration (specify) and/or basement 😿 Basement with Loft with Attached Garage with (2nd) Deck with a Deck with (2nd) Porch 1-Story # of Stories Foundation No Basement 2-Story 1-Story + Loft a Porch ☐ SANITARY ☐ PRIVY
| Mailing Address: Lot(s) J (specify) 715 182 8883 Agent Phone: PIN: (23 digits) 13200 Contractor Phone: ٤ City/State/Zip Proposed Structure Length: X Length: Seasonal Year Round Huy Use Town of: quarters, or cooking & food prep facilities) & Page CRECEDENCE Ingular ☐ CONDITIONAL USE HOW DO I FILL OUT THIS APPLICATION (visit our Plumber: Dennis Backare
Agent Mailing Address (include City/State/Zip): Distance Structure is from Shoreline : feet Distance Structure is from Shoreline: bedrooms E None attached Lot(s) No. Ō, Washbarn City/State/Zip: Width: ☐ Portable (w/service contract)
☐ Compost Toilet Sanitary (Exists)
Privy (Pit) or D C None (New) Block(s) No. Municipal/City Plan ☐ SPECIAL USE Sanitary Sewer/Sanitary System 8 Is on the property? Recorded Document: What Type of Subdivision: website www.bayfieldcounty.org/zoning/asp) Specify Type: Specify Type: H 7
Vaulted (min 200 gallon) 120 N.S. 16 **Dimensions** OS Is Property in Floodplain Zone? κ w ×× Height: X N Attached

| Yes | No Height: 218-349-9492 Cell Phone: 373-2070 Written Authorization Telephone Page(s) Ownership) OTHER Tank. 797 08h (C) Are Wetlands Footage Square Present?
☐ Yes ØN. K X City Water Well

Owner(s): ________(If there are Multiple (

Owners listed on

Deed All Owners must sign or letter(s) of authorization must accompany this application)

Date 4/2/

9

1 (we) declare that this application (incl. aClerchresponsible (0) the detail and the county rel

Authorized Agent:

(If you are signing on behalf of the

owner(s) a letter of authorization must accompany this application)

Address to send permit

73200

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Washburd,

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Attach
Copy of Tax Statement
you recently purchased the property send your Recor

Recorded Deed

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Top of the planning & Zoning Desiration plans must be a poroced by the Planning & Zoning Desiration of the closest point) We assure that the closest point the close to the closest point that the closest point th	Issuance Information (County Use Only) Permit Denied (Date):
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ove (prior to continuing) Ove (prior to continuing) A A A A A A A A A A A A A A A A A A A	Setback to Privy (Portable, Composting)
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Show Location of (*): Show: Show:	(3) Show Location of (*): (4) Show: (5) Show:
Show Location of: Show / Indicate:	

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